



A DOCPHOENIX

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CLAIM	(1) FOR	(2) NUMBER FILED	(3) NUMBER EXTRA	(4) RATE	(5) CALCULATIONS
	TOTAL CLAIMS (37 CFR 1.16(c) or (j))	17 - 20* =	0	x \$ 9.00 =	\$ 0.00
	INDEPENDENT CLAIMS (37 CFR 1.16(b) or (i))	1 - 3** =	0	x \$ 42.00 =	0.00
	MULTIPLE DEPENDENT CLAIMS (if applicable) 37 CFR 1.16(d))			+ \$	=
				BASIC FEE (37 CFR 1.16)	370.00
				Total of above Calculations =	370.00
				TOTAL =	\$ 370.00

\* Reissue claims in excess of 20 and over original patent.  
 \*\* Reissue independent claims over original patent.

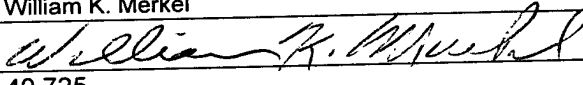
6. ☒ Small entity status: Applicant claims small entity status. See 37 CFR 1.27.
7. The Commissioner is hereby authorized to credit overpayments or charge the following fees to Deposit Account No. \_\_\_\_\_:
- a. ☐ Fees required under 37 CFR 1.16.
- b. ☐ Fees required under 37 CFR 1.17.
- c. ☐ Fees required under 37 CFR 1.18.
8. ☐ A check in the amount of \$ \_\_\_\_\_ is enclosed.
9. ☐ Payment by credit card. Form PTO-2038 is attached.
10. ☐ Applicant requests suspension of action under 37 CFR 1.103(b) for a period of \_\_\_\_\_ months (not to exceed 3 months) and the fee under 37 CFR 1.17(i) is enclosed.
11. ☐ New Attorney Docket Number, if desired \_\_\_\_\_  
 [Prior application Attorney Docket Number will carryover to this CPA unless a new Attorney Docket Number has been provided herein.]
12. a. ☐ Receipt For Facsimile Transmitted CPA (PTO/SB/29A)
- b. ☒ Return Receipt Postcard (Should be specifically itemized, See MPEP 503)
13. ☐ Other: \_\_\_\_\_

**NOTE:** The prior application's correspondence address will carry over to this CPA UNLESS a new correspondence address is provided below.

## 14. NEW CORRESPONDENCE ADDRESS

<input checked="" type="checkbox"/> Customer Number or Bar Code Label	04743	or	<input type="checkbox"/> New correspondence address below
Name	William K. Merkel Marshall, Gerstein & Borun		
Address	6300 Sears Tower 233 South Wacker Drive		
City	Chicago	State	IL
		Zip Code	60606-6357
Country	United States of America	Telephone	312-474-6300
		Fax	312-474-0448

## 15. SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT REQUIRED

Name (Print/Type)	William K. Merkel
Signature	
Registration No. (Attorney/Agent)	40,725
Date	December 24, 2002

I hereby certify that this correspondence is being deposited with the U.S. Postal Service as Express Mail, Airbill No. EV180486238US, in an envelope addressed to: Box CPA, Commissioner for Patents, Washington, DC 20231, on the date shown below.

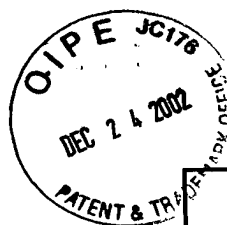
Dated: December 24, 2002

Signature: 

Laura L. Frasher

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TECH CENTER 1600/2900



PTO/SB/17 (10-02)  
Approved for use through 10/31/2002. OMB 0651-0032  
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# FEE TRANSMITTAL for FY 2003

Patent fees are subject to annual revision.

☒ Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$) 0.00

## Complete if Known

Application Number 09/362,485  
Filing Date July 28, 1999  
First Named Inventor L. Flohe  
Examiner Name D. Johsannsen  
Group Art Unit 1634  
Attorney Docket No. 29473/35834

## METHOD OF PAYMENT (check all that apply)

☐ Check ☐ Credit Card ☐ Money Order ☐ Other ☒ None

☐ Deposit Account

Deposit Account Number

13-2855

Deposit Account Name

MARSHALL, GERSTEIN & BORUN

The Commissioner is hereby authorized to: (check all that apply)

☐ Charge fee(s) indicated below ☒ Credit any overpayments

☐ Charge any additional fee(s) during the pendency of this application

☐ Charge fee(s) indicated below, except for the filing fee

to the above-identified deposit account.

## FEE CALCULATION

### 1. BASIC FILING FEE

Large Entity	Fee Code	Fee (\$)	Small Entity	Fee Code	Fee (\$)	Fee Description	Fee Paid
	1001	740		2001	370	Utility filing fee	
	1002	330		2002	165	Design filing fee	
	1003	510		2003	255	Plant filing fee	
	1004	740		2004	370	Reissue filing fee	
	1005	160		2005	80	Provisional filing fee	
SUBTOTAL (1)						(\$)	0.00

### 2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE

Total Claims  -20\*\* =  x  =   
Independent Claims  -3\*\* =  x  =   
Multiple Dependent  =

Large Entity	Fee Code	Fee (\$)	Small Entity	Fee Code	Fee (\$)	Fee Description
	1202	18		2202	9	Claims in excess of 20
	1201	84		2201	42	Independent claims in excess of 3
	1203	84		2203	140	Multiple dependent claim, if not paid
	1204	84		2204	42	** Reissue independent claims over original patent
	1205	18		2205	9	** Reissue claims in excess of 20 and over original patent

SUBTOTAL (2) (\$) 0.00

\*\*or number previously paid, if greater. For Reissues, see above

## FEE CALCULATION (continued)

### 3. ADDITIONAL FEES

Large Entity	Fee Code	Fee (\$)	Small Entity	Fee Code	Fee (\$)	Fee Description	Fee Paid
	1051	130		2051	65	Surcharge - late filing fee or oath	
	1052	50		2052	25	Surcharge - late provisional filing fee or cover sheet.	
	1053	130		1053	130	Non-English specification	
	1812	2,520		1812	2,520	For filing a request for ex parte reexamination	
	1804	920*		1804	920*	Requesting publication of SIR prior to Examiner action	
	1805	1,840*		1805	1,840*	Requesting publication of SIR after Examiner action	
	1251	110		2251	55	Extension for reply within first month	
	1252	400		2252	200	Extension for reply within second month	
	1253	920		2253	460	Extension for reply within third month	
	1254	1,440		2254	720	Extension for reply within fourth month	
	1255	1,960		2255	980	Extension for reply within fifth month	
	1401	320		2401	160	Notice of Appeal	
	1402	320		2402	160	Filing a brief in support of an appeal	
	1403	280		2403	140	Request for oral hearing	
	1451	1,510		1451	1,510	Petition to institute a public use proceeding	
	1452	110		2452	55	Petition to revive - unavoidable	
	1453	1,280		2453	640	Petition to revive - unintentional	
	1501	1,280		2501	640	Utility issue fee (or reissue)	
	1502	460		2502	230	Design issue fee	
	1503	620		2503	310	Plant issue fee	
	1460	130		1460	130	Petitions to the Commissioner	
	1807	50		1807	50	Processing fee under 37 CFR 1.17(q)	
	1806	180		1806	180	Submission of Information Disclosure Stmt	
	8021	40		8021	40	Recording each patent assignment per property (times number of properties)	
	1809	740		2809	370	Filing a submission after final rejection (37 CFR 1.129(a))	
	1810	740		2810	370	For each additional invention to be examined (37CFR 1.129(b))	
	1801	740		2801	370	Request for Continued Examination (RCE)	
	1802	900		1802	900	Request for expedited examination of a design application	
Other fee (specify)						2006 Basic Filing fee - Utility (CPA)	370.00
*Reduced by Basic Filing Fee Paid						SUBTOTAL (3) (\$)	370.00

## SUBMITTED BY

Name (Print/Type) William K. Merkel

Registration No. (Attorney/Agent)

40,725

## Complete (if applicable)

Telephone (312) 474-6300

Signature

*William K. Merkel*

Date

December 24, 2002

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*Laura L. Frasher*  
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